



Primary Prevention Policies to Face Domestic Violence against Women: Lessons from Australia to Brazil¹

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Abstract

This paper analyses the primary prevention policies in Australia to tackle domestic violence against women, at the national and state levels, as they relate to gender and other strengthening factors. It also discusses how these experiences are related to Brazilian policies. The article analyses the backlash in Brazil to the promotion of gender equality and indicates possible inspiration for policies related to reducing the strengthening factors of gender violence.

Keywords

Policies; primary prevention; domestic violence; Australia; Brazil.

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Introduction

This article seeks to present the Australian public policies related to primary prevention of violence against women and analyse how they relate to Brazilian policies. The actions for preventing domestic violence can be divided into three levels, covering primary, secondary and tertiary prevention (Krug et al. 2002; Our Watch, Australia's National Research Organisation for Women's Safety [ANROWS] and Victorian Health Promotion Foundation [VicHealth] 2015: 15; Patró-Hernández 2017; VicHealth 2017: 5). Primary prevention actions, or prevention actions in the strict sense, are directed to the population as a whole. Their focus is the primary (or underlying) drivers of domestic violence related to stereotyped perspectives of the social roles between men and women, which normalise violence. Secondary prevention is also known as early intervention. It aims to reach individuals who are at higher risk of being a victim or perpetrator of domestic violence, or individuals who are facing or practising embryonic violence that can escalate to more severe episodes. Tertiary prevention is also referred to as 'response' and occurs in a situation in which the domestic violence act has already taken place. In this context, victim support and perpetrator accountability aim to avoid repetition of violence, which usually has a cyclical character.

Primary prevention targets the entire population and, as a result, inevitably reaches individuals who are at higher risk of being or who have already been a victim of violence. While primary prevention favours early prevention as an intervention, it has a distinct and complementary focus, as it endeavours to end the violence before it starts, eliminating its underlying causes. This article focuses on analysing the primary prevention strategies from Australia and Brazil. First, it presents an overview of violence against women in Brazil and compares it with Australian statistics. Then, it explores the Australian National Plan and state strategies to implement primary prevention policies of violence against women. These policies are linked to the underlying causes of violence against women, which are gender inequality as well as factors that can increase this violence. Finally, challenges to achieving gender equality in the Brazilian context are explored, including potential inspirations of public policies focused on reducing violence-boosting factors.

Violence Against Women in Brazil

The need to combat violence against women is recognised internationally. The United Nations (UN 2020) introduced gender equality and female empowerment as one of its 17 Sustainable Development Goals, and highlighted ending of all forms of violence against women as a specific objective. The World Health Organization (WHO) further emphasised that violence against women is an international concern, and indicated that it is one of the main concerns regarding public health policies around the world (Krug et al. 2002).

While in Australia one woman is killed every week by her partner (Cussen and Bryant 2015) in an act of domestic violence, classifying it as a national crisis (Our Watch, ANROWS and VicHealth 2015), in Brazil, four women are killed per day in this setting (Waiselfisz 2015). Some Brazilian capital cities have even more alarming rates of violence against women, such as in Vitória (11.8 deaths per 100,000) and Maceió (10.7 per 100,000). In Brazil, 4,762 women were killed in 2013, which means 4.8 murders by 100,000 habitants had occurred (2015). This percentage increased by 21% between 2003 and 2013. Further, 50.3% of these homicides took place in the family violence context and 33.2% of the perpetrators were a current or former male partner. Brazil now has the fifth highest rate of female deaths due to domestic violence (2015).

The alarming rate at which women are killed in Brazil is associated with daily violence against women. In 2014, 47,646 women were raped, with an average of one rape occurring every 11 minutes (Fórum Brasileiro de Segurança Pública 2015). The same survey also indicated that 90.2% of women interviewed were afraid they will be raped. Other research undertaken with 10,000 women in the north-east region indicated that 27% of women experienced at least one act of domestic violence in their lives, and within this group 11.9% affirmed they were a victim of an act of domestic violence in the past year (Carvalho and Oliveira 2016). Health services data further shows that violence is part of a woman's life cycle, changing only who perpetrates the violence (Waiselfisz 2015). In childhood, women are victimised by their parents,

then during adolescence by their fathers, stepfathers, boyfriends and brothers. Adult women are commonly victimised by their boyfriends, partners and siblings, and elderly women by their children, partners, siblings and carers (2015).

Beyond the immediate health consequences of physical violence, psychological violence worsens the risk of mental illness such as depression, anorexia, insomnia, stress and anxiety, increasing the likelihood of alcohol and other drug abuse, as well as self-injury and attempts at suicide (Krug et al. 2002; VicHealth 2017: 11). In this vein, VicHealth (2017: 11) emphasised that 'intimate partner violence contributes more to the burden of disease for women than any other risk factor in women aged 18–44 years, including well-known risk factors like tobacco use, high cholesterol and use of illicit drugs'. The social, health and economic costs behind this massive violation of women's human rights are enormous. Australian studies indicate that domestic violence is the most common cause for homelessness and is a risk factor of violence against children (Council of Australian Governments [COAG] 2011: 7). Additionally, it is estimated that the global cost of domestic violence against women is AUD\$21.7 billion annually (PricewaterhouseCoopers Australia [PwC], Our Watch and VicHealth 2015).

The dimension of the problem in Brazil requires reflection on public policies for preventing the violation of women's human rights. According to the WHO, 'the importance of primary prevention of violence by intimate partners is often overshadowed by the importance of the large number of programmes that, understandably, seek to deal with the immediate and numerous consequences of violence' (Krug et al. 2002: 113). In Brazil, the structure and articulation of services to respond to individual demands of domestic violence is still a great challenge (Campos 2015; Pasinato 2015). Besides, conservative resistances have been obstructing advances in the field of education for gender equality (Miguel 2016). Other countries have more successful experiences than Brazil regarding public policies to combat violence against women, and they serve as inspiration.

The Evolution of Australian Public Policies for Preventing Domestic Violence

Domestic violence in Australia is the focus of unprecedented attention at the state and federal levels (McCulloch et al. 2016: 31). Within the main policy guidelines, the National Council traced its foundation in 2008 in a strategy report to reduce violence against women and their children. This document contributed to the elaboration of the *National Plan to Reduce Violence against Women and their Children 2010–2022*, or the National Plan (COAG 2011).

In Australia, many institutions are joining forces to solve domestic violence. One of them is the Australian National Research Organization for Women's Safety (ANROWS), established in 2013 as part of a National Plan strategy to reduce domestic violence. ANROWS is an independent organisation composed of representatives from the federal, state and territory governments with a fixed mandate as well as independence to produce evidence-based research that can be transferred to other contexts, guiding the construction of public policies and practices focused on reducing the rates of violence against women. For this purpose, ANROWS receives research funding.

Another public agency is Our Watch, founded in 2013 as a successor of the National Foundation to Prevent Violence against Women and Children. Our Watch aims to 'lead national efforts to drive change in the culture, behaviour and power imbalances that lead to violence against women and their children' (VicHealth 2017: 14). One outcome of the partnership between ANROWS, Our Watch and VicHealth is the report *Change the Story* (published in 2015), which played an essential role in shaping reforms in Australian institutions and fostering public policies focused on the prevention of gendered violence in all Australian states.

After the publication of the National Plan in 2010, several states engaged in local strategic plans to move forward in public policies for preventing and responding to domestic violence against women (see McCulloch 2016: 31; VicHealth 2017: 14). Victoria has the most advanced policies in the area (Fitz-Gibbon et al. 2017) and launched the first Australian plan focused on primary prevention of domestic violence

covering a 10-year period (Victorian Government 2009; Webster 2007). This plan is recognised as an international innovation in research focused on prevention (Our Watch, ANROWS and VicHealth 2015: 14), and was followed by the *Royal Commission into Family Violence* (Neave, Faulkner and Nicholson 2016). The Victorian Royal Commission produced a massive report with seven volumes, which involved 13 months of hearings with 220 experts and 44 discussion sessions. The Commission analysed in detail international trends to combat domestic violence and made 227 recommendations to the state (Neave, Faulkner and Nicholson 2016). In 2014, when the Commission was established, the state premier, Daniel Andrews, affirmed that family violence was ‘the most urgent law and order emergency occurring in our state and the most unspeakable crime unfolding across our nation’ (McCulloch et al. 2016: 31). After the conclusion of the Commission’s work, the Victorian Government produced a plan to combat domestic violence addressing the next 10 years, detailing each desired reform, including online monitoring of each goal (2016a), as well as one strategy for preventing domestic violence (2017) and another for promoting gender equality in several public policies (2016b). In 2016–2017, the Victorian Government committed a budget of AUD\$572 million to implement the Royal Commission recommendations.

The state of Queensland is also ‘disputing’ the leadership regarding innovation in public policies for preventing domestic violence, producing, in partnership with the Special Taskforce on Domestic and Family Violence (STDFV), the report, *Not Now, Not Ever* (2015). Additionally, the ‘Safe Homes, Safe Families’ plan was published for the state of Tasmania (Department of Premier and Cabinet of Tasmania 2015); a prevention strategy for 2022 was created in Western Australia (Department of Child Protection 2012); and New South Wales established perhaps the most concise plan of all, the *NSW Domestic and Family Violence Blueprint for Reform 2016–2021* (NSW Ministry of Health 2016). There are also strategies for promoting gender equality and women’s safety developed by the South Australia Government (2015) and the Queensland Government (2016).

At the national level, Australia built its first National Plan for a 12-year period, receiving support from both major political parties (which alternates in the position of situation and opposition) and counting on the engagement between national and state governments (COAG 2011). The National Plan is followed by three-year action plans, which specify short-term goals focused on strengthening professionals who work in the field, integrating systems, sharing information to foster effectiveness evidence, and monitoring performance. In this vein, it is important to highlight the National Plan goals in ‘raising awareness and building respectful relationships in the next generation. The aim is to bring attitudinal and behavioural change at the cultural, institutional and individual levels, with a particular focus on young people’ (COAG 2011: 10). The National Plan has six general outcomes: communities will become safe and free of violence; relationships will be respectful; Indigenous communities will be strengthened; services can meet the needs of women and their children who are facing violence; effectiveness of justice system responses will improve; and perpetrators will stop the violence and become accountable for their actions (COAG 2011: 14–29). Each general outcome has its specific actions, such as to engage the community against violence against women, improve the focus on primary prevention, make progress in terms of gender equality, improve young people’s capacity to build respectful relationships, support adults in building respectful relationships, promote positive behaviour of Australian men, promote the leadership of Indigenous women, strengthen the capacity of Indigenous communities at the local level, increase access to existing services, and to strengthen the capacity of women’s first contact with services to identify and meet their needs, among many others.

For each general goal, a specific indicator of success is also created, as well as a criterion to assess if the outcomes were achieved, which includes periodic measurements during the whole project. There are two specific tools to measure the effectiveness of this plan implementation—the personal safety research conducted by the Australian Bureau of Statistics (2013), and the National Community Attitudes towards Violence against Women Survey (VicHealth 2010, 2014). Both aim to show people’s understanding of violence and gender equality (see VicHealth 2017). The Third Action Plan 2016–2019 (Department of Social Services 2016) outlined strategic actions for family violence prevention and early intervention, including the incorporation by all states of the *Change the Story* framework and its implementation (Our

Watch, ANROWS and VicHealth 2015). Consequently, this action aims to promote a national campaign to change culture, behaviours and attitudes that cause violence against women and their children.

Primary Prevention Strategies: Drivers of Domestic Violence Against Women

All Australian states are committed to implementing primary prevention strategies to curb domestic violence (Department of Social Services 2016: 9). According to Australian research, there are both gendered drivers that lead to violence against women and reinforcing factors that do not cause the violence itself, but can escalate the frequency or severity at which it occurs (Our Watch, ANROWS and VicHealth 2015: 8). International research indicates that the most relevant factors related to the geographic distribution of violence perpetrated by an intimate partner are linked to masculine authority and femininity (Heise and Kotsadam 2013). These norms are used to justify the use of violence to discipline women and to support customs that disadvantage women from accessing resources.

Conversely, girls' education is highlighted as a protective factor, in that countries where women have access to work tend to note decreases in the risk of violence. However, paid employment in countries where women do not usually work can also represent a risk factor for women. Studies have further documented a direct relationship 'between the many dimensions of gender inequality in public and private life and the occurrence of violence against women' (VicHealth 2017: 16; see also WHO and London School of Hygiene and Tropical Medicine 2010; Webster and Flood 2015). In this sense, the most influential predicting factors for tolerance of violence at the individual level are low levels of gender equality support and preservation of stereotyped gender roles (VicHealth 2010).

The main drivers of gender inequality include the social tolerance of violence against women, male control over decision-making, limitations to women's independence in the public and private spheres, rigid gender stereotypes, and male peer support that emphasises violence and disrespect against women (Our Watch, ANROWS and VicHealth 2015: 8). Factors that reinforce violence include the tolerance of violent behaviour in general, personal experiences of violence, the weakening of prosocial behaviours (particularly the abuse of alcohol), social inequalities, discrimination, and violent disciplinary reactions to the progress of women's human rights (2015: 8). In Australia, research shows that the groups at higher risk of violence include young women; pregnant women; women in the process of separation; disabled women; Indigenous, migrant or refugee women; and women living in rural or remote areas (VicHealth 2017: 7–10).

The gendered drivers arise from structures, norms and practices with a historical, economic and social background. As a result, they are deeply rooted in culture. Nevertheless, they are not inevitable but modifiable. Thus, intervention in the primary drivers of violence against women can result in an effective prevention strategy before the occurrence of violence against women (VicHealth 2017: 4). A socio-ecological model of analysis indicates the need to intervene at multiple levels: individual, organisation, community, institutional and society (Our Watch, ANROWS and VicHealth 2015: 21; VicHealth 2017: 17). Hence, actions focused on sociocultural change patterns of tolerance must be global and present in several areas of social life, such as 'workplaces, schools, community organisations, sports clubs, media and popular culture' (Our Watch, ANROWS and VicHealth 2015: 9).

Likewise, reinforcing factors have to be addressed, questioning the normalisation of violence as a behaviour that aims to affirm masculinity, preventing the exposure to violence, and being attentive to all people exposed to violence, to reduce its consequences (2015: 9). It is especially necessary to intervene in the social tolerance towards alcohol abuse as a masculine practice, including in the process of constructing gender equality in relationships and instilling respect into men's and boys' social skills (2015: 9). In this sense, bystander intervention plays an essential role in breaking the cycle of normalised violence, particularly in a male environment (see VicHealth 2017: 15).

Programs to implement these actions should involve direct participation of men, women, young people and children at the individual and group levels; developing strategies to build equal and respectful

relationships, as well as awareness programs to engage communities; and use of social marketing, strengthening advocacy actions by civil society, in particular by feminists movements (Our Watch, ANROWS and VicHealth 2015: 41; VicHealth 2017: 17). Many awareness campaigns have been exploring the negative effects of violence against women and the need to respect women in public and private spaces (e.g., at the national level, the Australian Government's 'Stop It at the Start' campaign; see VicHealth 2017: 15). At the state level, Victoria launched a plan and a strategy to promote gender equality (Victorian Government 2016a, 2016b), primary prevention policies, the creation of a State Agency for preventing domestic violence (with its own budget), a new social campaign for preventing violence, and to improve the Respectful Relationships program in all schools (2016a: 25). Additionally, the research focused on how the media has been discussing the issue and how the approach should be made to stimulate greater social engagement for ending violence (see Sutherland et al. 2016).

While living in Victoria in 2017, I frequently noticed education campaigns targeting the importance of recognising psychological violence against women and encouraging men to seek help and advice through public programs that subvert aggressive behaviour. I also observed the media's engagement in broadcasting domestic violence cases, promoting discussions in the public discourse as a strategy to influence society's perspective on the topic. Public policies related to promoting women's rights have recognised that the media and arts are relevant sources of information and culture, shaping social norms, attitudes and discourses about gender, which can either reinforce or challenge stereotypes (Victorian Government 2016b: 31). Indeed, Australian strategies for public policies have been developed to foster media engagement, including guides for reporters and awards for the best reports in this field (see Our Watch 2016b; Sutherland et al. 2016; The Walkey Foundation 2019).

One of the main areas for the organisational development of women's rights is at schools and workplaces. Research from Canada (Wolfe et al. 2009) and the United States (Foshee et al. 2005) indicated that ongoing education programs for preventing dating violence (applied in this case to 14-year-old students) have substantially reduced the risk of relational violence. In this line, the National Plan (Department of Social Services 2016: 10) and Our Watch emphasised the need to engage not only students but also educators, 'staff, parents and the local community to create gender equality' and respectful relationships (Our Watch, ANROWS and VicHealth 2015: 41). To this end, didactic materials were produced to encourage schools' engagement in the promotion of women's rights and respectful relationships (Our Watch 2020a; VicHealth 2016).

Education programs in Australia are focused not only on gender equality but also on respectful relationships within the community, at all ages (Victorian Government 2016a: 27). They include the discussion of such topics as the negative effects of gender stereotypes, sexual objectification of women, effects on the corporeal image and self-esteem, victim-blaming, sexting and other discriminatory behaviours that can lead to the normalisation of violence against women (Victorian Government 2016b: 21). These primary prevention strategies are inspired by other public health programs that target whole-population effects (VicHealth 2017: 19; Webster 2007). These intervention plans also contain subplans that detail each action (see PwC, Our Watch and VicHealth 2015; VicHealth 2017: 20; Webster and Flood 2015). One of the guidelines states that these actions should take a universal approach (i.e., everyone should be part of it) but with strategies tailored to different communities, created with their participation (VicHealth 2017: 17; Victorian Government 2016a: 27). In other words, one-size-fits-all or up-to-down programs are likely to fail.

There are also plans to promote gender equality and to ensure that women and men have equal access to spaces of power, sources and opportunities, as well as to be treated with dignity, respect and fairness (see Victorian Government 2016b). These plans aim to incorporate gender lenses in the construction of policies, budgets and long-term economic plans. For example, there is a provision in Victoria that requires 50% of government jobs to be filled by women, including higher positions such as state secretary, as well as positions within the legal system (2016b: 17).

Primary prevention is seen as a new field for preventing violence against women at the international level, but there is a lack of research about it and scant program evaluation (VicHealth 2017: 21). As such, it is crucial to retain evaluation and monitoring of public policies (but not to replicate projects), with adaption and testing of new approaches in different contexts (2017: 21). Hence, these primary prevention actions are simultaneously evidence based and evidence-building.

Reflecting on Primary Prevention in the Brazilian Context

The Australian guidelines for primary prevention parallel the provisions of the Maria da Penha Law in Brazil (Presidency of the Republic of Brazil 2006), as well as the Brazilian National Plans of Public Policies for Women (2004, 2009, 2012). All three Brazilian plans progressively considered the importance of talking about gender through inclusive and non-discriminatory education programs. The Third Brazilian National Plan encompassed in its general goals the need to consolidate in the education policies perspectives of gender, race, ethnicity, sexual orientation, generation, disability and respect to diversity (Brazil 2012).

As outlined in the Australian research, rigid stereotypes and gender roles are the primary drivers of domestic violence. Similarly, in Brazil, studies have demonstrated that frustrated expectations regarding strict gender roles based within patriarchal frameworks motivate acts of domestic violence (Aguilar 2009; Angelim 2009; Diniz 1999). These stereotyped roles founded on masculine supremacy then create myths that legitimate the tolerance of violence against women (Patr6-Hernández 2017). This further proves that Brazil still has a long way to go. Research by Avon and Data Popular (2013) outlined the persistence of rigid gender stereotypes in Brazilian men. For example, the study found that showing affection was perceived as typical feminine behaviour, while aggression was typically masculine. The study also showed that 30% of male participants agreed and that 16% did not disagree or agree with the statement, 'men should not take insults home'. Further, 46% considered it unacceptable that women wear revealing clothes, and 89% believed that women should keep the house in order (Avon Institute and Data Popular 2013). Other research from the Avon Institute (2016) indicated that 31% of men wish not to be sexist, but do not know how. A further 48% of male participants disagreed that men should look after their home by allowing women to work, and 35% believed that household duties and child care are female responsibilities. This study revealed that men have little willingness to defend anti-machismo ideas in masculine environments and that the most efficient tool to change these practices involves talking to other men about it. Despite that, stereotypical and rigid gender roles in Brazil remain high.

Traditionally, ending violence against women has focused on women's interventions. However, to overcome this problem in full, from a preventive perspective, it is necessary to establish a dialogue with men, emphasising the reconstruction of nonviolent masculinity. In this vein, Jewkes (2002: 1427) affirms that 'prevention of intimate partner violence must involve engagement with both sides of a relationship'.

Men's engagement in the discussion about gender relations and the fight against sexist social representations is not only a way to prevent violence against women, but also equally a human rights issue for men. In fact, men die by suicide four times more than women in Brazil (Ferreira 2015), and 56.5% of men would like to have a closer relationship with their friends, as well as improved ability to express more affection and talk about their feelings and doubts (UN Women Brazil 2015a). Gender stereotypes also discriminate against men who decide to follow careers typically assigned to women, such as in children's education and healthcare professions, as well as men who look for flexible work to allow for more time at home (Victorian Government 2016b: 5). In 2014, men were over-represented in Brazilian prisons, at 93.5% (Brazil 2014). Thus, there is a link between masculinity and violent behaviours. Additionally, men are the overwhelming victims of homicides involving firearms (94.4%) (Waiselfisz 2016). They also tend to have difficulty talking about illness and encounter greater problems with substance abuse and antisocial behaviour (Gold 1998). While men are in a privileged position regarding traditional heterosexual relationships, there is a need to recognise that the oppressor's violence often ends up oppressing themselves: violence is a scorpion that stings itself. As highlighted by UN Women Brazil (2015b), 'to reach gender

equality is necessary an inclusive approach, recognising men's essential role as partners to fight for women's rights'.

Changing this story remains a challenge, because 'if there is plenty material available regarding the sexism issue in our society, it is not that common the production of content showing how men can change their behaviour' (2015a: 63). The UN indicates that the adequate mechanisms to engage men in this transformation process involve school education, the spread of alternative gender narratives in the media, advocacy in policies, reflection groups for perpetrators, welcoming spaces to discuss masculinity, peer education, independent education actions, compassionate advocacy, nonviolent communication and leadership support for organisational change (2015a: 80). These guidelines are present in the ongoing Australian policies.

In Brazil, there is a challenge to work with primary prevention due to the current political context that 'demonises' the discussion of gender relations in schools. The justification for that is an alleged 'policy of neutrality' that would prevent the propagation of a 'gender ideology' (Miguel 2016). Due to this conservative movement, the words 'gender' and 'gender equality' were removed from the National Plan of Education (Presidency of the Republic of Brazil 2014). This view puzzles concepts, arguing the so-called 'gender ideology' would be indoctrinating 'defenceless children' into becoming LGBTQI+ or destroying family values. That said, discussion about gender involves rethinking about the unequal relations between men and women in exercising their rights. This relationship is based on stereotyped roles that attribute domination and control to men and foster various acts of violence against women. While the central focus of the gender equality discussion is not LGBTQI+ claims, the respect to this group is equally aligned to republican values of respect to human rights such as privacy, protection from violence and, above all, respect of personal dignity. It is not about bolstering sexual orientations, but rather recognising a space of freedom and respecting a diversity of convictions and manifestations of individuality. Particularly in the relationships between men and women, to not take a side in this critical discussion on female oppression is to side with the status quo of gender violence, affecting both girls and boys. In sum, it is talking about social relationships based on respect. Pasinato and Lemos (2017: 22) emphasised that education committed to promoting equality requires a gender perspective. According to them, teaching non-sexist and non-discriminatory language, integrating boys and girls in sports, and discussing women's presence in the social and political history of the country and the world would assist in this regard.

Brazil's commitment to women's fundamental rights can be seen in the Inter-American Convention on the Prevention, Punishment, and Eradication of Violence against Women, known as the Belém do Pará Convention, ratified by the country in 1996 (Organization of American States 1994). Specially, Article 8(b) states it is a human right to create prevention policies, which involves the obligation to remove the causes that foster the systematic violation of women's rights (see Ávila 2014). This conventional rule was implemented in Maria da Penha Law (Presidency of the Republic of Brazil 2006), which provides the following guidelines:

Article 8. The public policy aimed at restraining domestic and family violence against women will be implemented by means of an integrated set of actions by the Federal Union, the States, the Federal District and the Municipalities and nongovernment actions, according to the following guidelines: ...

III. respect, in the social communication media, for the ethical and social values of the person and the family, avoiding stereotyped roles that legitimize or encourage domestic and family violence, in compliance with item III of article 1, item IV of article 3 and item IV of article 221 of the Federal Constitution; ...

VIII. promotion of educational programs that disseminate ethical values of unrestricted respect to the dignity of the human person with a gender and race or ethnicity perspective; ...

IX. emphasis, in the school syllabus of all levels of education, on contents related to human rights, gender and race or ethnicity equity and the problem of domestic and family violence against women.

The implementation of these norms of fundamental rights encompasses the discussion about gender relations in schools. In this arena, Article 12.4 of the American Convention on Human Rights (1969) is usually mentioned, as it establishes that 'parents or guardians, as the case may be, have the right to provide for the religious and moral education of their children or wards that is in accord with their own convictions'. However, one should not undertake the interpretation of norms of fundamental rights in isolation. There must be a systematic interpretation, along with the other provisions of fundamental rights (Graus 2002: 113). Hermeneutic activity must reconcile potential antinomies, even the apparent ones, giving place to an adequate interpretation to the diversity of constitutional principles in the discussion (Guastini 1998: 223). Consequently, while Article 12.4 indicates that it is not possible for the state to forbid parents to provide religious and moral education to children, familial teaching is not free to endorse violations of women's fundamental rights, because there is another fundamental norm that equally impedes the maintenance of social and cultural values that exacerbates gendered violence. Combating violence against women goes beyond a moral issue; it is a violation of human rights with epidemic proportions. Hence, it demands a firm state response regarding its intolerance. Given these points, parents under the guise of providing moral education cannot reproduce a world vision that encourages male supremacy and the use of violence to maintain this perspective. It is not possible to claim the fundamental rights of family and moral education to prohibit the state from teaching its future citizens about republican values of respecting women's fundamental rights.

State protection against violence is a fundamental female right. The state has a duty to implement public policies for preventing violence against women, and this duty is not restricted only to punishing aggressors, but is imperative to combating the underlying causes of violence. Although there are limitations in the current National Education Plan, there are ongoing education initiatives based on international guidelines for protecting women, such as the 'Maria da Penha goes to School' program (Viza, Sartori and Zanello 2017). This is a joint initiative between various legal, education and policy bodies.

In contrast, the Australian experience enables reflection about other strategies. In Brazil, most social campaigns focus on encouraging the criminal denouncement of domestic violence and punishing aggressors. Recently, new campaigns target men to avoid aggression. However, most of these efforts do not adopt an in-depth approach towards changing sexist social roles, which are indeed the root cause of domestic violence. Broader social campaigns are essential. One Queensland report explained that 'this needs to be long term, and future focused, and emphasise the seriousness of domestic and family violence, the community's intolerance of domestic violence, and the services available to victims and perpetrators' (STDFV 2015: 10).

Beyond creating policies, it is necessary to implement and monitor them. This guideline is expressly mentioned in the Maria da Penha Law (Presidency of the Republic of Brazil 2006: Art. 8(III)). However, in Brazil, it is rare to have research funded by the government to measure the effectiveness of prevention policies. The few existent studies are limited to evaluation of the implementation of the service network (Martins, Cerqueira and Matos 2015) or about effectiveness related to police and legal systems (see Pareschi et al. 2016). Also, there is a scarcity in implementing primary prevention policies and subsequent evaluation. International research has indicated that the articulation of feminist movements directly affects the implementation of state policies for preventing violence against women (Dyson 2012; Weldon and Htun 2013). Hence, strengthening these movements is a central strategy for allowing continuity in the prevention of public policies for women.

Primary Prevention of Risk Factors Overlapping Gender Drivers

Gender inequality in both public and private spheres is a *sine qua non* condition of the occurrence of domestic violence against women (VicHealth 2017: 4), and it must be the central focus of public policies

for preventing violent acts. While gendered drivers are identified as the root cause of violence, many reinforcing factors escalate the harmful effects (Our Watch, ANROWS and VicHealth 2015). In this respect, Jewkes (2002) affirmed that domestic violence against women has two causes—the gendered drivers and a more comprehensive culture that normalises the use of violence. Likewise, the WHO highlighted that programs to combat intimate violence by men against women ‘should be integrated with other programmes, such as those tackling youth violence, teenage pregnancies, substance abuse and other forms of family violence’ (Krug et al. 2002: 111).

Domestic violence is a complex problem with multiple and interwoven factors that demand comprehension of an ecological model (Krug et al. 2002; Patr6-Hernández 2017). Thus, beyond the work to change social norms that normalise male superiority and its consequent power and control over women, it is necessary to intervene in other areas that maximise discrimination and interpersonal violence, and to reduce poverty and alcohol abuse. These factors do not cause violence itself, but they boost it. As a result, reducing the reinforcing factors is another a strategy for reducing the gendered violence affecting women’s lives today. Women cannot wait decades for changes in the sexist norms of social relations.

The overlapping factors of discrimination are particularly present in the Brazilian context, and include racism, poverty, social exclusion, homophobia, religious intolerance and particularities of rural communities, such as riverside (*ribeirinhas*) communities, historical black communities (*quilombolas*), Romani people and others. Notably, 66.7% of the total women murdered in Brazil were black (Waiselfisz 2015), despite black people representing 51% of the population (Brazilian Institute of Geography and Statistics 2010). From 2003 to 2013, the percentage of white women murdered reduced by 9.8%, while it increased by 54.2% for black women (Waiselfisz 2015). Brazilian research also indicated that black women are more exposed to severe violence than non-black women (Carneiro 2017). Additionally, racial discrimination acts against black women encompass an overlapping of racism and gender stereotypes, including offences related to sexual morality, aesthetic features such as hair and odour, and reduced labour capacity (Ávila and Araujo 2017).

Despite the fact that gender violence is a ‘perversely democratic’ phenomenon that affects women from all social classes, studies have indicated that macro-social factors, such as social inequality and breakdown of social relations, increase the probability of mortality (Jewkes 2002). For example, low education level, poverty status, social factors, and lack of family and legal support increase stress and limit the resources available to women to leave violent situations. These factors indicate that, regarding primary prevention, reducing social inequalities is a broader strategy to reduce violence against women as well as other forms of harm. Secondary and tertiary prevention directed to individual victims is also crucial to recognise that these groups are naturally in a high-risk area, which demands specific public policies to attend their needs.

The stark figures of interpersonal violence and the proliferation of firearms in Brazil shape a specific context in which domestic violence can occur. Indeed, studies estimate that there are approximately 8.6 million illegal firearms in Brazil (Dreyfus and Nascimento 2005), attributing to approximately 44,861 murders in 2014 (Waiselfisz 2016). Consequently, shots from firearms are the most common cause of women’s death in Brazil (48.8%), followed by wounds caused by sharp objects (25.3%), acts of aggression (8%), and strangulation or suffocation (6.1%), among others causes (11.8%) (Waiselfisz 2015). By contrast, in Australia, the most common causes of women’s deaths in domestic violence situations are stabbing (42%), followed by beating (21%), strangulation or suffocation (14%), and firearms (11%) (Cussen and Bryant 2015).⁴ A cultural context of aggressiveness raises the risk of domestic violence in a conflict situation (Campbell et al. 2003). That is to say, the high rates of interpersonal violence in society in general are factors that boost violence against women. Campaigns to reduce violence in general in society will also contribute to reducing these factors that amplify violence against women.

Alcohol abuse is another risk factor of male–female violence (Campbell et al. 2003; Medeiros 2015). Jewkes (2002) argues that alcohol reduces one’s inhibitory constraints and facilitates the creation of an environment for ‘male discipline’. However, consideration of this risk factor must not disregard one’s personal responsibility towards self-control and sexist attitudes. Campaigns to reduce alcohol abuse

cannot substitute or undermine policies to promote gender equality. With this strategic caution, policies to reduce alcohol abuse can affect, in the short term, the overall incidence of domestic violence. These policies should be implemented together and focus on both gender drivers and reinforcing factors. There are difficulties to making this happen, mainly due to strong resistance from the alcohol industry, which often associates alcohol consumption to masculinity and female objectification, particularly in Brazilian beer advertising campaigns.

There is a lot of work to be done regarding the underlying causes of violence, in the deconstruction of gender stereotypes and in the affirmation of a social environment that effectively recognises equal opportunities for women in public and private spheres of life. Nevertheless—albeit should a substantial reduction of gender inequality take place—it is important to know that a spark of gender inequality where elevated rates of interpersonal violence and other violations of rights are noted will significantly affect women's human rights. It is not possible to fully reach equality beyond an environment in which uniform respect is given to other fundamental rights, such as combating racism, poverty, social exclusion, alarming rates of interpersonal violence, and the neglect of health and mental policies to address alcohol and drug abuse. There are internal connections between these fundamental rights that require active cooperation. The need to combat gender-based violence is and must remain the focus of primary prevention public policies for stopping violence against women. It is essential not to lose sight of the protection assigned by other fundamental rights, and to recognise their intersectionality with the promotion of women's rights.

Conclusion

In the Brazilian context of the resurgence of conservative resistances to the feminist agendas of gender equality, it is important to emphasise that more developed countries, like Australia, have been working for decades to incorporate discussion of gender relations at all levels, including in schools and by developing education and social projects. These initiatives can inspire Brazil to overcome its current religious fundamentalist drift and extreme political views of intolerance. In the international context, Australia might be the leading country investing in the prevention of violence against women.

However, there are similarities between Australia's and Brazil's plans of primary prevention to combat violence. The difference is that in Australia, the policies set at the national level do not contradict the national education plan. Instead, they gain strength through the state plans and effectively result in projects, education and social actions, with investments at the national, state and local levels. The Australian experience shows that it is not enough to design policies: it is crucial to develop indicators of efficacy and effectiveness, implementing and monitoring with research and reassessing the achievements of original guidelines, while reshaping original policies. In Brazil, actions for preventing domestic violence have solely focused on security and justice. Thus, they predominantly reflect a punitive approach, bar the Maria da Penha Law, which is based on a holistic approach of prevention, protecting women and making aggressors accountable for their actions.

To face domestic and family violence against women, it is necessary to address all its causes. Gender inequality is the root of all forms of violence against women. Hence, the promotion of gender equality is a precondition for prevention. In this line, primary prevention policies to face gender violence are a genuine human right. Women lead the journey to promote gender equality, but men must join them in solidarity. In the long run, building a fairer society with less violence is a universal right and a duty for us all.

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- ⁴ The Brazilian data encompassed only female victims, while the Australian data considered intimate partner homicides, regardless of the victim's sex. Yet, this study highlighted 75% of victims were women.

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